

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 8
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00620583 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Mosaic			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 22 / 2016</div> </div>		
Mailing Address 4801 Viewpoint Place			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">90.00</div>		
City Cheverly	State MD	Zip Code 20781	Transaction ID : D605326 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 22 / 2016</div> </div>		
Purpose of Expenditure Fliers		Category/ Type 004	Name of Federal Candidate Rodham Clinton, Hillary, , ,		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">288394.58</div>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____					

Full Name of Payee Mosaic			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 22 / 2016</div> </div>		
Mailing Address 4801 Viewpoint Place			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">90.00</div>		
City Cheverly	State MD	Zip Code 20781	Transaction ID : D605327 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 22 / 2016</div> </div>		
Purpose of Expenditure Fliers		Category/ Type 004	Name of Federal Candidate Rodham Clinton, Hillary, , ,		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">288394.58</div>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____					

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">180.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Crystal, , ,

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Mosaic			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2016		
Mailing Address 4801 Viewpoint Place			Amount 300.00		
City Cheverly	State MD	Zip Code 20781	Transaction ID : D605328		
Purpose of Expenditure Fliers		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2016		
Name of Federal Candidate Rodham Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 288394.58			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee Mosaic			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2016		
Mailing Address 4801 Viewpoint Place			Amount 135.00		
City Cheverly	State MD	Zip Code 20781	Transaction ID : D605329		
Purpose of Expenditure Fliers		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2016		
Name of Federal Candidate Rodham Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 288394.58			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	435.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Mosaic		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2016	
Mailing Address 4801 Viewpoint Place		Amount 90.00	
City Cheverly	State MD	Zip Code 20781	Transaction ID : D605330
Purpose of Expenditure Fliers	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2016	
Name of Federal Candidate MCGINTY, KATHLEEN, ALANA, ,		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 9817.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Mosaic		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2016	
Mailing Address 4801 Viewpoint Place		Amount 90.00	
City Cheverly	State MD	Zip Code 20781	Transaction ID : D605331
Purpose of Expenditure Fliers	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2016	
Name of Federal Candidate TRUMP, DONALD, J., ,		<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 288394.58		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	180.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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NAME OF COMMITTEE (In Full) Working America Coalition		FEC IDENTIFICATION NUMBER ▼ C C00620583	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Mosaic		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2016	
Mailing Address 4801 Viewpoint Place		Amount 300.00	
City Cheverly	State MD	Zip Code 20781	Transaction ID : D605332
Purpose of Expenditure Fliers	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2016	
Name of Federal Candidate MCGINTY, KATHLEEN, ALANA, ,		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 9817.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Mosaic		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2016	
Mailing Address 4801 Viewpoint Place		Amount 59.40	
City Cheverly	State MD	Zip Code 20781	Transaction ID : D605333
Purpose of Expenditure Fliers	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2016	
Name of Federal Candidate MCGINTY, KATHLEEN, ALANA, ,		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 9817.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	359.40
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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NAME OF COMMITTEE (In Full) Working America Coalition		FEC IDENTIFICATION NUMBER ▼ C C00620583	
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Full Name of Payee Mosaic		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2016	
Mailing Address 4801 Viewpoint Place		Amount 135.00	
City Cheverly	State MD	Zip Code 20781	Transaction ID : D605334
Purpose of Expenditure Fliers	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2016	
Name of Federal Candidate Rodham Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 288394.58		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Mosaic		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2016	
Mailing Address 4801 Viewpoint Place		Amount 135.00	
City Cheverly	State MD	Zip Code 20781	Transaction ID : D605335
Purpose of Expenditure Fliers	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2016	
Name of Federal Candidate MURPHY, PATRICK, , ,		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought 95023.87		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	270.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Mosaic		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2016	
Mailing Address 4801 Viewpoint Place		Amount 59.40	
City Cheverly	State MD	Zip Code 20781	Transaction ID : D605336
Purpose of Expenditure Fliers	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2016	
Name of Federal Candidate TOOMEY, PATRICK, JOSEPH, ,		<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 9817.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Mosaic		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2016	
Mailing Address 4801 Viewpoint Place		Amount 720.00	
City Cheverly	State MD	Zip Code 20781	Transaction ID : D605337
Purpose of Expenditure Fliers	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2016	
Name of Federal Candidate KIHUEN, RUBEN, , ,		<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 16532.40		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	779.40
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
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NAME OF COMMITTEE (In Full) Working America Coalition		FEC IDENTIFICATION NUMBER ▼ C C00620583
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee The Pivot Group, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2016
Mailing Address 1720 I Street, NW #550		Amount 8116.06
City Washington	State DC	Zip Code 20006
Purpose of Expenditure Fliers	Category/ Type 004	Transaction ID : D605348 Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2016
Name of Federal Candidate ROSEN, JACKY, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 10796.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee The Pivot Group, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2016
Mailing Address 1720 I Street, NW #550		Amount 8792.40
City Washington	State DC	Zip Code 20006
Purpose of Expenditure Fliers	Category/ Type 004	Transaction ID : D605349 Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2016
Name of Federal Candidate KIHUEN, RUBEN, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 16532.40		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	16908.46
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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NAME OF COMMITTEE (In Full) Working America Coalition	FEC IDENTIFICATION NUMBER ▼ C C00620583
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee The Pivot Group, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2016		
Mailing Address 1720 I Street, NW #550			Amount 16908.46		
City Washington	State DC	Zip Code 20006	Transaction ID : D605350		
Purpose of Expenditure Fliers		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2016		
Name of Federal Candidate CORTEZ MASTO, CATHERINE, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
			43583.96		

Full Name of Payee The Pivot Group, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2016		
Mailing Address 1720 I Street, NW #550			Amount 16908.46		
City Washington	State DC	Zip Code 20006	Transaction ID : D605351		
Purpose of Expenditure Fliers		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2016		
Name of Federal Candidate Rodham Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
			288394.58		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	33816.92
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	52929.18

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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